

P E R M I T

CITY OF NAPOLEON  
255 W. RIVERVIEW AVE  
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING  
PH (419) 592-4010  
FAX (419) 599-8393

PERMIT NO: 1658                      DATE ISSUED: 06-06-03                      ISSUED BY: BND

JOB LOCATION: 179 DEROME DR                      EST. COST:

LOT #:    SUBDIVISION NAME:

OWNER: MCBRIDE, JOHN  
ADDRESS: 1477 OAKWOOD AVE  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-6721

AGENT: JT'S BLDG MAINT & CO  
ADDRESS: 825 HOBSON ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-6085

USE TYPE - RESIDENTIAL:                      OTHER:

ZONING INFORMATION

DIST:                      LOT DIM:                      AREA:                      FYRD:                      SYRD:                      RYRD:  
MAX HT:                      # PKG SPACES:                      # LOADING SP:                      MAX LOT COV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW:                      REPLMNT:                      ADD'N:                      ALTER:                      REMODEL:

WORK INFORMATION

SIZE - LGTH:                      WIDTH:                      STORIES:                      LIVING AREA SF:  
GARAGE AREA SF:                      HEIGHT:                      BLDG VOL DEMO PERMIT:

WORK DESCRIPTION  
DRIVEWAY REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
DRIVEWAY PERMIT		25.00



TOTAL FEES DUE                      25.00

6-6-03

DATE

*Ferry Jones*

APPLICANT SIGNATURE

P E R M I T

CITY OF NAROLEON  
 255 W. KENNEDY AVE  
 NAROLEON, OHIO 43242

DIVISION OF BUILDING & ZONING  
 PH (614) 253-2818  
 FAX (614) 253-2822

PERMIT NO. 1234      DATE ISSUED: 08-08-03      ISSUED BY: HED

JOB LOCATION: 175 BROWN DR      EST. COST: \$10,000

LOT #1      SUBDIVISION NAME: BROWN DR

OWNER: WESTER, JOHN      ADDRESS: 1477 OAKWOOD AVE  
 CITY: NAROLEON, OH 43242      PHONE: 614-253-4721

AGENT: JY'S SIGN MAINT & CO      ADDRESS: 415 BROWN ST  
 CITY: NAROLEON, OH 43242      PHONE: 614-253-2822

USE TYPE - RESIDENTIAL      OTHER:

BOARD OF ZONING APPEALS

BOOK TYPE - NEW      HEIGHT:      DISTRICT:      AREA:      TYPE:      KIND:      USE

NEW ZONING      BOARD OF ZONING APPEALS

WORK ORIGINATOR      BOARD OF ZONING APPEALS

DATE - 08/08/03      HEIGHT:      DISTRICT:      AREA:      TYPE:      KIND:      USE

THE DESCRIPTION      DATE DATE      THE AMOUNT DUE

PROJECT PERMIT      08-08-03      \$10,000



TOTAL FEE \$10,000      DATE

APPLICANT SIGNATURE: *[Signature]*      DATE: 8/8/03

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1658

DATE ISSUED: 06-06-2003

JOB LOCATION: 179 DEROME DR

OWNER: MCBRIDE, JOHN

OWNER PHONE: 419-592-6721

CONTRACTOR: JT'S BLDG MAINT & CONSTR

CONTRACTOR PHONE: 419-592-6085

WORK DESCRIPTION: DRIVEWAY REPLACEMENT

PLUMBING:    UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          SEWER INSP \_\_\_\_\_

MECHANICAL:   UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          FURNACE REPLC \_\_\_\_\_    AIR COND \_\_\_\_\_

ELECTRICAL:   UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          SERV UPGR \_\_\_\_\_

BUILDING:    SITE \_\_\_\_\_    FTG \_\_\_\_\_    FNDT \_\_\_\_\_

          STRUC \_\_\_\_\_    ROOF \_\_\_\_\_    EXT \_\_\_\_\_

          VENT \_\_\_\_\_    ACCES \_\_\_\_\_    EGRS \_\_\_\_\_

          SMKDT \_\_\_\_\_    FINAL \_\_\_\_\_

          ISSUE TEMP OCCUP \_\_\_\_\_    ISSUE OCCUP \_\_\_\_\_

STRG SHED:   SITE \_\_\_\_\_    FINAL \_\_\_\_\_

SIGN:        FTG \_\_\_\_\_    FINAL \_\_\_\_\_

FENCE:       SITE \_\_\_\_\_    FINAL \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INSPECTOR INITIALS: \_\_\_\_\_

*Handwritten signature/initials*



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1658

DATE ISSUED: 06-06-2003

JOB LOCATION: 179 DEROME DR

OWNER: MCBRIDE, JOHN

OWNER PHONE: 419-592-6721

CONTRACTOR: JT'S BLDG MAINT & CONSTR

CONTRACTOR PHONE: 419-592-6085

WORK DESCRIPTION: DRIVEWAY REPLACEMENT

PLUMBING: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

SEWER INSP \_\_\_\_\_

MECHANICAL: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

FURNACE REPLC \_\_\_\_\_ AIR COND \_\_\_\_\_

ELECTRICAL: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

SERV UPGR \_\_\_\_\_

BUILDING: SITE \_\_\_\_\_ FTG \_\_\_\_\_ FNDDT \_\_\_\_\_

STRUC \_\_\_\_\_ ROOF \_\_\_\_\_ EXT \_\_\_\_\_

VENT \_\_\_\_\_ ACCES \_\_\_\_\_ EGRS \_\_\_\_\_

SMKDT \_\_\_\_\_ FINAL \_\_\_\_\_

ISSUE TEMP OCCUP \_\_\_\_\_ ISSUE OCCUP \_\_\_\_\_

STRG SHED: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

SIGN: FTG \_\_\_\_\_ FINAL \_\_\_\_\_

FENCE: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

MISC INSP: 6-7-04

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSPECTOR INITIALS: BYP

